KENNEDY PARK MEDICAL & REHABILITATION

6001 ALDERSON STREET

SCHOFIELD 54476 Ownership: Corporation Phone: (715) 359-4257 Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? No No Title 18 (Medicare) Certified? Number of Beds Set Up and Staffed (12/31/02): 138 Total Licensed Bed Capacity (12/31/02): Title 19 (Medicaid) Certified? 158 Yes Number of Residents on 12/31/02: 134 Average Daily Census: 134

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/02) %							
Home Health Care	No			Age Groups	%		47.8		
Supp. Home Care-Personal Care	No	•		1			36.6		
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65	0.7	•	15.7		
Day Services	No	Mental Illness (Org./Psy)	37.3	65 - 74	6.7				
Respite Care	Yes	Mental Illness (Other)	0.7	75 - 84	34.3		100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.7	85 - 94	52.2	* * * * * * * * * * * * * * * * * * *	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.7	95 & Over	6.0	Full-Time Equivalent			
Congregate Meals	No	Cancer	3.7			Nursing Staff per 100 R	Residents		
Home Delivered Meals	No	Fractures	8.2		100.0	(12/31/02)			
Other Meals	No	Cardiovascular	11.9	65 & Over	99.3				
Transportation	No	Cerebrovascular	9.0			RNs	9.0		
Referral Service	No	Diabetes	6.0	Sex	용	LPNs	6.5		
Other Services	Yes	Respiratory	3.7			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	17.9	Male	26.9	Aides, & Orderlies	37.2		
Mentally Ill	No			Female	73.1	1			
Provide Day Programming for			100.0			1			
Developmentally Disabled	No				100.0	1			

## Method of Reimbursement

		edicare			edicaid itle 19			Other			Private Pay	<u>,</u>		amily Care			lanaged Care	l 		
Level of Care	No.	00	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	90	Per Diem (\$)	No.	90	Per Diem (\$)	No.	00	Per Diem (\$)	No.	90	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	22	100.0	302	97	100.0	110	0	0.0	0	15	100.0	184	0	0.0	0	0	0.0	0	134	100.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	22	100.0		97	100.0		0	0.0		15	100.0		0	0.0		0	0.0		134	100.0

KENNEDY PARK MEDICAL & REHABILITATION

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02											
		!											
					% Needing		Total						
Percent Admissions from:		Activities of	%	_	sistance of								
Private Home/No Home Health			Independent	One	Or Two Staff	Dependent							
Private Home/With Home Health	1.6	Bathing	2.2		90.3	7.5	134						
Other Nursing Homes	3.2	Dressing	2.2		91.8	6.0	134						
Acute Care Hospitals	87.1	Transferring	17.9		79.1	3.0	134						
Psych. HospMR/DD Facilities	0.0	Toilet Use	3.0		93.3	3.7	134						
Rehabilitation Hospitals	0.0		82.8		14.9	2.2	134						
Other Locations	1.1	*******	*****	*****	*****	******	******						
Total Number of Admissions	186	Continence		%	Special Treat	ments	%						
Percent Discharges To:		Indwelling Or Extern	al Catheter	6.0	Receiving R	Respiratory Care	9.0						
Private Home/No Home Health	18.9	Occ/Freq. Incontinen	t of Bladder	37.3	Receiving I	racheostomy Care	0.0						
Private Home/With Home Health	25.0	Occ/Freq. Incontinen	t of Bowel	34.3	Receiving S	Suctioning	0.0						
Other Nursing Homes	5.0				Receiving C	stomy Care	2.2						
Acute Care Hospitals	23.3	Mobility			Receiving I	ube Feeding	0.0						
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	1.5	Receiving M	echanically Altered D	iets 20.9						
Rehabilitation Hospitals	0.0	1			-	_							
Other Locations	5.0	Skin Care			Other Residen	t Characteristics							
Deaths	22.8	With Pressure Sores		2.2	Have Advanc	e Directives	100.0						
Total Number of Discharges		With Rashes		9.0	Medications								
(Including Deaths)	180				Receiving F	sychoactive Drugs	23.9						

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility	Pro	ership: prietary Group	100	Size: -199 Group	Ski	ensure: lled Group	Al: Faci:	lities
	90	%	Ratio	90	Ratio	90	Ratio	90	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	84.5	84.7	1.00	85.7	0.99	85.3	0.99	85.1	0.99
Current Residents from In-County	92.5	81.6	1.13	81.9	1.13	81.5	1.14	76.6	1.21
Admissions from In-County, Still Residing	32.8	17.8	1.85	20.1	1.63	20.4	1.61	20.3	1.61
Admissions/Average Daily Census	138.8	184.4	0.75	162.5	0.85	146.1	0.95	133.4	1.04
Discharges/Average Daily Census	134.3	183.9	0.73	161.6	0.83	147.5	0.91	135.3	0.99
Discharges To Private Residence/Average Daily Census	59.0	84.7	0.70	70.3	0.84	63.3	0.93	56.6	1.04
Residents Receiving Skilled Care	100	93.2	1.07	93.4	1.07	92.4	1.08	86.3	1.16
Residents Aged 65 and Older	99.3	92.7	1.07	91.9	1.08	92.0	1.08	87.7	1.13
Title 19 (Medicaid) Funded Residents	72.4	62.8	1.15	63.8	1.13	63.6	1.14	67.5	1.07
Private Pay Funded Residents	11.2	21.6	0.52	22.1	0.51	24.0	0.47	21.0	0.53
Developmentally Disabled Residents	0.0	0.8	0.00	0.9	0.00	1.2	0.00	7.1	0.00
Mentally Ill Residents	38.1	29.3	1.30	37.0	1.03	36.2	1.05	33.3	1.14
General Medical Service Residents	17.9	24.7	0.72	21.0	0.85	22.5	0.80	20.5	0.87
Impaired ADL (Mean)	41.6	48.5	0.86	49.2	0.85	49.3	0.84	49.3	0.84
Psychological Problems	23.9	52.3	0.46	53.2	0.45	54.7	0.44	54.0	0.44
Nursing Care Required (Mean)	5.4	6.8	0.80	6.9	0.78	6.7	0.80	7.2	0.75